FORM D

SEC Mail Processing Section

JUL 1172008

Washington, DC . 101

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

		OMB APPRO	VAL				
	OMB Number	r:	32	35-0076			
J	Expires:		June .	30, 2008			
	Estimated average burden hours per response 16.00						
1]	7557	SEC USE O	NLY				
	Prefix		Se	rial			
			1				

	endment and name has ch		cate change	e.)				
PRIVATE PLACEMENT OF COMMON S	STOCK AND WARRAN	<u>TS</u>						
Filing Under (check box(es) that apply):	☐ Rule 504 ☐	Rule 505	X Rule	506	Section 4(6)	□ ULOE		
Type of Filing: 🛛 New Filing	☐ Amendment							
	A. BASIC IDENT	TFICATION D	ATA					
1. Enter the information requested about the i	ssuer		•					
Name of Issuer (check if this is an amen	dment and name has chang	ged, and indicat	e change.)			-		
Magic Wheels, Inc.	·	_						
Address of Executive Offices (Number and St	reet, City, State, Zip Code)		Telephone Nu	mber (Includin	g Area Code)		
3837 13th Ave W, Ste 104, Seattle, WA				(206) 282-07				
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)								
(if different from Executive Offices)								
SAME								
Brief Description of Business				7	DDQ/	~ECCED		
Specialty Retail/Medical				7	PRO	CESSED		
Type of Business Organization					11 11	1 1 2008		
☐ Corporation ☐ limited partn	ership, already formed	☐ other	r (please sp	ecify):	JUL	1 1 5000		
☐ business trust ☐ limited partn	ership, to be formed					NI BELITEDO		
· 	<u>M</u>	onth Year			THOMSO	ON REUTERS		
Actual or Estimated Date of Incorporation or G	Organization: 1	1 9 6	🗷 Actu	al 🛛 Estima				
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Pos	stal Service abbi	reviation fo	or State:				
-	CN for Canada: FN for	r foreion iurisdi	ction)	UV	VIAI			

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SI address after the date on which it is due, on the date it was mailed by United States registered of Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must

must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments nee changes thereto, the information requested in Part C, and any material changes from the informathe Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.



08054676

anually signed

eceived at that

1 offering, any B. Part E and

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
 Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Ex Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Meginniss, Stephen M.
Business or Residence Address (Number and Street, City, State, Zip Code)
3837 13th Ave W, Ste 104, Seattle, WA 98119
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer ☐ Director ☐ General and/or Managing Partner
Full name (Last name first, if individual)
Baechler, Philip
Business or Residence Address (Number and Street, City, State, Zip Code)
3837 13th Ave W, Ste 104, Seattle, WA 98119
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Maddox, Robin
Business or Residence Address (Number and Street, City, State, Zip Code)
3837 13 th Ave W, Ste 104, Seattle, WA 98119
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual) Kennedy, Peter
Business or Residence Address (Number and Street, City, State, Zip Code)
3837 13th Ave W, Ste 104, Seattle, WA 98119
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Giuliani, David
Business or Residence Address (Number and Street, City, State, Zip Code)
3837 13th Ave W, Ste 104, Seattle, WA 98119
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Matas, Wendell
Business or Residence Address (Number and Street, City, State, Zip Code)
3837 13 th Ave W, Ste 104, Seattle, WA 98119
Check Box(es) that Apply:
Full name (Last name first, if individual)
Stafford, Janet
Business or Residence Address (Number and Street, City, State, Zip Code)
3837 13th Ave W, Ste 104, Seattle, WA 98119
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

				В. І	NFORMAT	TION ABO	UT OFFEI	RING				
											Yes	No
I. Has tl	he issuer so	ld, or does i						_	• • • • • • • • • • • • • • • • • • • •	••••••	. 🗅	X
2 Whee	ic the mini-	num invact			idix, Colum	_	-				€ N1/4	
Z. Wildi	is me minil	num mvest	mont that W	ш ос ассер	wa non an	y maividua	lf	•••••			. <u>\$ N/A</u>	
											Yes	No
	-		-	_								
										ndirectly, any ne offering. If		
a pers	son to be lis	sted is an a	ssociated pe	rson or age	ent of a brok	er or deale	r registered	with the Sl	EC and/or v	with a state or		
			broker or de t forth the in					ted are asso	ciated pers	ons of such a		
	(Last name			nonnation.		ter or delire	· only.					
	`		,									
Business	or Residenc	e Address (Number and	d Street, Ci	ty, State, Zi	p Code)						
Name of	Associated	Broker or D	Dealer									
States in \	Which Perso	n Listed H	as Solicited	or Intends	to Solicit Po	ırchasere						
			as soneneu individual				**************		***************			All States
[AL]	[AK]	[AZ]	[AR]	[ĆA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	(LA)	(ME)	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	{PA}
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[wi]	[WY]	[PR]
Full name	(Last name	first, if inc	lividual)		-		'.				·	
Business	or Residenc	e Address (Number and	1 Street, Cit	ty, State, Zij	p Code)		<u> </u>				
Name of	Associated I	Broker or D	Negler		_						·	
, ivalle of z	1330014104 1	DIOKEI OF E	Calci									
States in \	Which Perso	on Listed H	as Solicited	or Intends	to Solicit Pu	rchasers	_					
•		s" or check	individual	States)		•	••••••••					All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full name	(Last name	first, if inc	lividual)	,		••						
Business	or Residenc	e Address (Number and	l Street, Cit	y, State, Zir	Code)						
!		<u> </u>	·									
Name of A	Associated F	Broker or D	ealer									
			as Solicited									
			individual						FETT 7			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[Mi]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	(OR)	[PA]
, [RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	(WV)	rwn	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Δm	ount Already
	Type of Security	Offering Price	7	Sold
	Debt	<u>\$</u>	<u>\$</u>	<u> </u>
	Equity	\$1,500,000	\$	150,291
	☑ Common ☐ Preferred			
	Convertible Securities (including warrants)		\$	
	Partnership Interests	<u>\$</u>	\$	
	Other (Specify)	\$	\$	
	Total	\$1,500,000	\$	150,291
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate
		Number Investors		ollar Amount f Purchasers
	Accredited Investors		\$	150,291
	Non-accredited Investors		\$	
•	Total (for filings under Rule 504 only)		<u>s</u>	
	Answer also in Appendix, Column 4, if filing under ULOE			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Time of	De	ollar Amount
	Type of offering	Type of Security	DC	Sold
	Rule 505	•	\$	
	Regulation A		<u>s</u>	,
	Rule 504		\$	
	Total		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		•	
	Transfer Agent's Fees		\$	
	Printing and Engraving Costs	_	\$	1.500
	Legal Fees	X	\$	15,000
	Accounting Fees		<u>\$</u>	
	Engineering Fees		<u>\$</u>	
	Sales Commissions (specify finders' fees separately)		\$	
	Other Expenses (identify)		\$	
	Total	X	\$	15,000

_	C. OFFERING FRIC	e, number of investors, expenses and c	3.C	OF PROCEEDS		
	b. Enter the difference between the agg Question I and total expenses furnished in the "adjusted gross proceeds to the issuer."		\$1,4	185,000		
5.	for each of the purposes shown. If the am and check the box to the left of the estin	gross proceeds to the issuer used or proposed to be use ount for any purpose is not known, furnish an estimate that. The total of the payments listed must equal that in response to Part C - Question 4.b above.	te			
				Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$		\$
	Purchase, rental or leasing and installation	of machinery and equipment		\$		\$
	Construction or leasing of plant buildings a	nd facilities		\$		\$
		the value of securities involved in this offering that ecurities of another issuer pursuant to a merger)				
	·			\$		\$
	Repayment of indebtedness			\$		\$
	Working capital			\$	X	\$1,485,000
Ot	her (specify):					\$
	Column totals			\$	(X)	\$1,485,000
To	tal Payments Listed (column totals added)				X	\$1,485,000
	·					
		D. FEDERAL SIGNATURE				
sig	nature constitutes an undertaking by the issu	ned by the undersigned duly authorized person. If this er to furnish to the U.S. Securities and Exchange Comaccredited investor pursuant to paragraph (b)(2) of Rul	miss	sion, upon written		
M	uer (Print or Type) agic Wheels, Inc.	Signature Sur Boechla D	ate	7/02,	120	2008
	me of Signer (Print or Type) ilip Baechler	Title of Signer (Print or Type) CEO		7 7		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
I.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule? See Appendix, Column 5, for state response.	Yes	No IXI
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a not CFR 239.500) at such times as required by state law.	ice on F	orm D (17
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished offerees.	by the is	ssuer to
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Un Offering Exemption (ULOE) of the state in which this notice is filed and understand that the issuer claiming the availability the burden of establishing that these conditions have been satisfied.		
	te issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by authorized person.	y the u	ndersigned
M	suer (Print or Type) agic Wheels, Inc. Title of Speer (Print or Type) Date 7/2/200	8	

CEO

Instruction:

Philip Baechler

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	_	· · · · · · · · · · · · · · · · · · ·	4			5	
	to non-a investor	ed to sell ccredited s in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No	Common Stock and Warrants	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ		X	\$127	1	\$127	0	0		X	
AR	<u> </u>									
CA										
со	<u></u>							ļ <u></u> .		
CT	ļ			·	· 					
DE		i								
DC										
⊢ FL		X	\$250	1	\$250	0	0		X	
GA			<u>-</u> -							
HI										
ID										
IL		j								
IN										
! IA								ļ	_	
KS										
KY		X	\$20,000	1	\$20,000	0	0		X	
LA ÷										
ME +										
MD		<u> </u>								
+ MA					··	1				
MI										
MN										
MS										
МО										
MT										

APPENDIX

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	to non-a	ed to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Common Accredited Non-				Number of Non-Accredited Investors	Amount	Yes	No			
NE	_										
NV	, The second second										
NH											
NJ											
NM								_			
NY											
NC								_			
ND											
ОН											
OK				· 							
OR											
PA											
RI											
SC											
SD											
TN											
TX											
UT											
VT											
VA											
WA		X	\$129,914	6	\$129,914	0	0		X		
ψV											
WI							-				
WY											
PR				-		END	,				